## P18000036845

(Requestor's Name)			
(Address)			
(Address)			
(160.655)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Basiness Entry Name)			
(Document Number)			
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Real Sale

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: LANNA ANDRADI	EINC	
DOCUMENT NUM	BER: P18000036845		
	of Amendment and fee are sub	mitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	IANNA DE ANDRADE		
		Name of Contact Persor	1
		Firm/ Company	
	35-61 84TH STREET APT 60	18	
	JACKSON HEIGHTS, NY 11	Address 372	
		City/ State and Zip Code	2
	iannandrade I@hotmail.com		
	E-mail address: (to be use	ed for future annual report	notification)
For further information	n concerning this matter, please	e call:	
IANNA DE ANDRA	DE	at (	363-8778
Name of Contact Person		Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made p	ayable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	<sup>1</sup> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of	
IANNA ANDRADE INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P18000036845	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
HIRE UP SERVICES INC	The new
name must be distinguishable and contain the word "corporation," "co" lnc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA NASSE
D. If amending the registered agent and/or registered office addresses registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent NA	
(Florida stree	et address)
New Registered Office Address:	, Florida_
	City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			<u></u>
Remove			
4) Change			<del></del>
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Remove			
5) Change			
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6) Change			
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	ng or adding additional Articles, en ditional sheets, if necessary). (Be sp			
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f an amen provision (if no	dment provides for an exchange, rest implementing the amendment applicable, indicate N/A)	eclassification, or cance if not contained in the	ellation of issued shares, amendment itself:	
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The date of each amendment(s) a date this document was signed.	doption:	, if other than
·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ar fficient for approval.	nendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendme	ing statement ent(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	·•	
	(voting group)	
selected	tector, president or other officer – if directors or officers have l, by an incorporator – if in the hands of a receiver, trustee, or	not been other court
appoint	ed fiduciary by that fiduciary)	
/	IANNA DE ANDRADE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

the

the